

## **OVERVIEW AND FINDINGS**

### **Program Description**

The Child Health and Disability Prevention (CHDP) program provides comprehensive health assessments for the early detection and prevention of disease and disabilities in low-income children and youth as mandated by Section 124025 of the Health and Safety Code. A complete health assessment consists of a health history, physical examination, developmental assessment, nutritional assessment, dental assessment, vision and hearing tests, tuberculin test, laboratory tests, immunizations, health education/anticipatory guidance, and referral for any needed diagnosis and treatment.

CHDP is responsible for resource and provider development to ensure that high quality services are delivered and accessible to children; outreach to target populations to increase participation; and health education to community agencies and residents to increase the knowledge and acceptance of preventive services. The program is financed and has standards established at the state level and is operated at the local level by health departments in each county and the cities of Berkeley, Long Beach and Pasadena.

CHDP also oversees the screening and follow-up components of the federally-mandated Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) program for Medi-Cal eligible children and youth; provides preventive health assessments for non-Medi-Cal eligible children; and monitors the school entry program which requires that all children entering the first grade or kindergarten have either a certificate of health examination or a waiver on file at their school.

### **Children Served by CHDP**

This report on health assessments is based on information obtained from providers completing the CHDP Confidential Screening and Billing Forms (PM 160), which were submitted to the CHDP fiscal intermediary for dates of services from July 1, 2000, through June 30, 2001. All forms adjudicated from July 2000 through January 2002 are included.

There are three versions of the Confidential Screening and Billing Forms (PM 160) in use. Providers for most Medi-Cal fee for service and State-funded health assessments use the standard PM 160. Head Start and State Preschool programs use a PM 160 designed specifically for reporting the delivery of preventive health care services to children enrolled in the programs. The "Information-Only" PM 160 is used to report services rendered to Medi-Cal children enrolled in managed cares plans. Because they are not used as a billing form, the "Information-Only" PM 160's are not edited by the fiscal intermediary, and therefore the data from these forms may be less reliable than data reported on the other PM 160 forms.

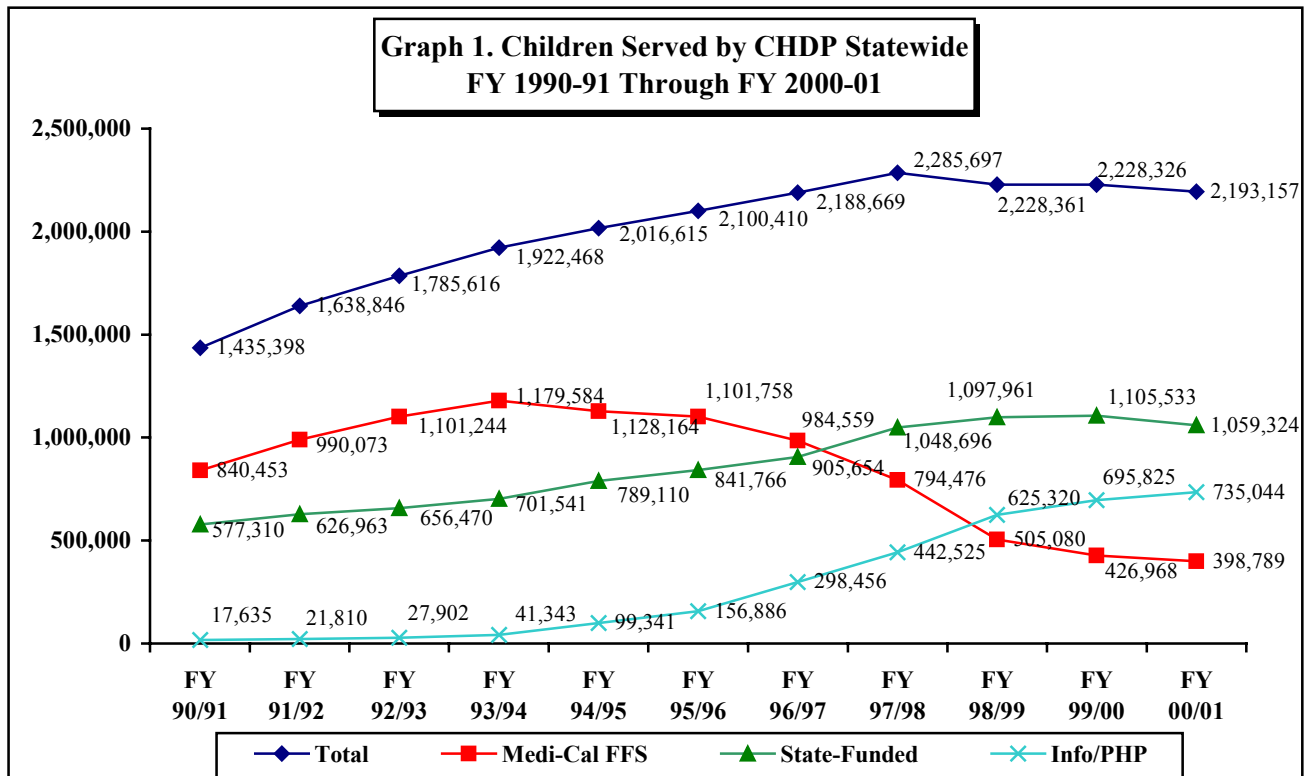
As noted in Table 1 during fiscal year (FY) 2000-01, the CHDP program provided preventive health services to an estimated 2,193,157 children (unduplicated count) with 3,125,918 visits, an average of 1.4 visits per child. This unduplicated count of children (see unduplication method later in this section), based on county of residence, was for claims submitted for dates of service occurring between July 1, 2000, through June 30, 2001.

From FY 1990-91 to FY 1997-98 there was a gradual increase in the number of children served by CHDP. Overall, these changes represent an average increase of 6.9 percent per fiscal year (see Table 1). From FY 1998-99 to FY 2000-01, the total children served by CHDP slightly decreased. There were 35,169 fewer children served by CHDP in FY 2001-00 compared to FY 1999-00, a 1.6 percent decline. This decline may have been attributable to children being transferred to other health care programs, such as Healthy Families, or due to under-reporting of complete or partial CHDP preventive health assessments provided by Medi-Cal Managed Care (MCMC) Plans.

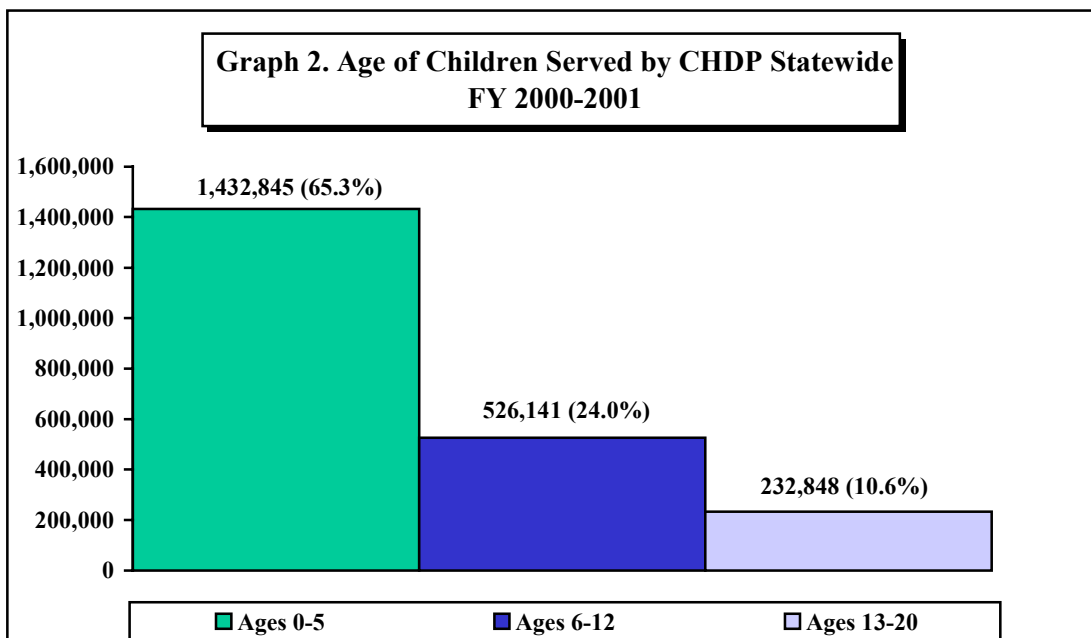
Comparing the total number served by different funding sources from FY 2000-01 to FY 1999-00, 28,179 fewer Medi-Cal Eligible Fee-For-Service (Medi-Cal FFS) children were reported as receiving services in 2000-01 which is a 6.6 percent decline. There were 39,219 more Information Only/Prepaid Health Plan (Info/PHP) children served in FY 2000-01, a 5.6 percent increase. State-funded children served were 46,209 less in FY 2000-01, a 4.2 percent decrease (see Graph 1).

**Table 1. Number and Percent Change for CHDP children Served  
From FY 1991 to 2001**

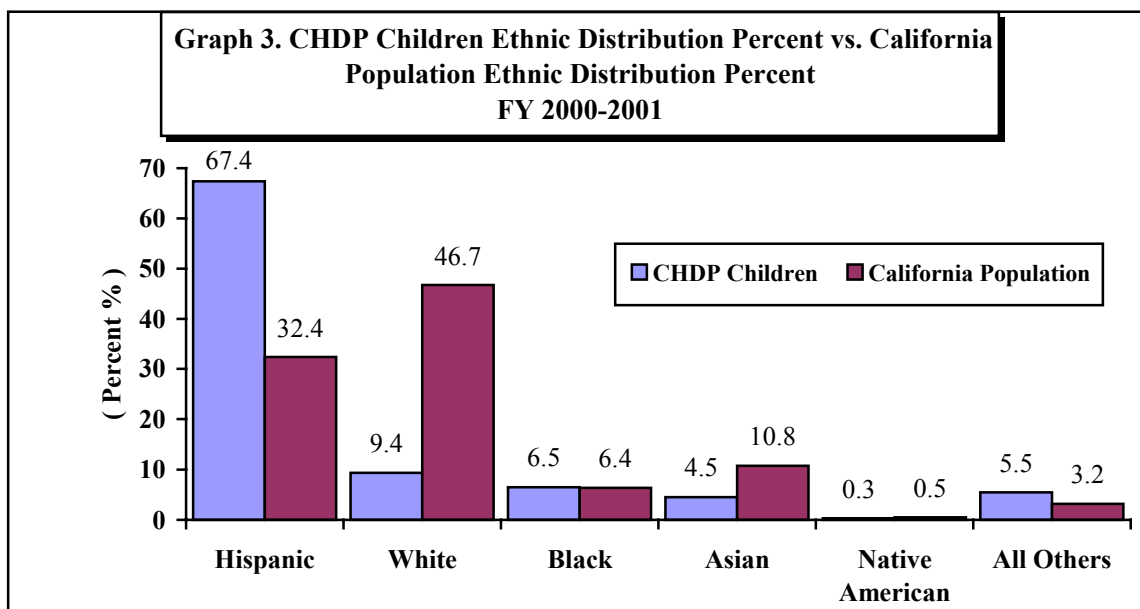
<b>Fiscal Year</b>	<b>Children Served</b>	<b>Number Change Compared to Previous Fiscal Year</b>		<b>Percent Change From Previous Fiscal Year</b>
1990-91	1,435,398	1991/92 - 1990/91	203,448	14.2
1991-92	1,638,846			
1992-93	1,785,616	1992/93 - 1991/92	146,770	9.0
1993-94	1,922,468	1993/94 - 1992/93	136,852	7.7
1994-95	2,016,615	1994/95 - 1993/94	94,147	5.0
1995-96	2,100,410	1995/96 - 1994/95	83,795	4.2
1996-97	2,188,669	1996/97 - 1994/95	88,259	4.2
1997-98	2,285,697	1997/98 - 1996/97	97,028	4.4
1998-99	2,228,361	1999/98 - 1997/98	-57,336	-2.5
1999-00	2,228,326	2000/99 - 1998/99	-35	-0.0
<b>2000-01</b>	<b>2,193,157</b>	<b>2001/00 - 2000/99</b>	<b>-35,169</b>	<b>-1.6</b>



Of the 2,193,157 children served by CHDP, 65.3 percent were age 0 to 5, 24.0 percent were age 6 to 12, and 10.6 percent were age 13 to 20 (see Graph 2).



Of the 2,193,157 children served by the CHDP program, 67.4 percent were Hispanic, 9.4 percent were White, 6.5 percent were Black, 4.5 percent were Asian, 0.3 percent were Native American and 5.5 percent were Other (i.e., Filipino, Pacific Islander, etc.). There were 6.4 percent of the children served whose ethnicity was not reported for CHDP in FY 2000-01. Further the ethnic distribution of CHDP children in FY 2000-01 was different from the ethnic distribution of the California population.



According to the California Census 2000, 46.7 percent of the California population were White, 6.4 percent were Black, 10.8 percent were Asian, 32.4 percent were Hispanic, 0.5 percent were Native American and 3.2 percent were others (see Graph 3).

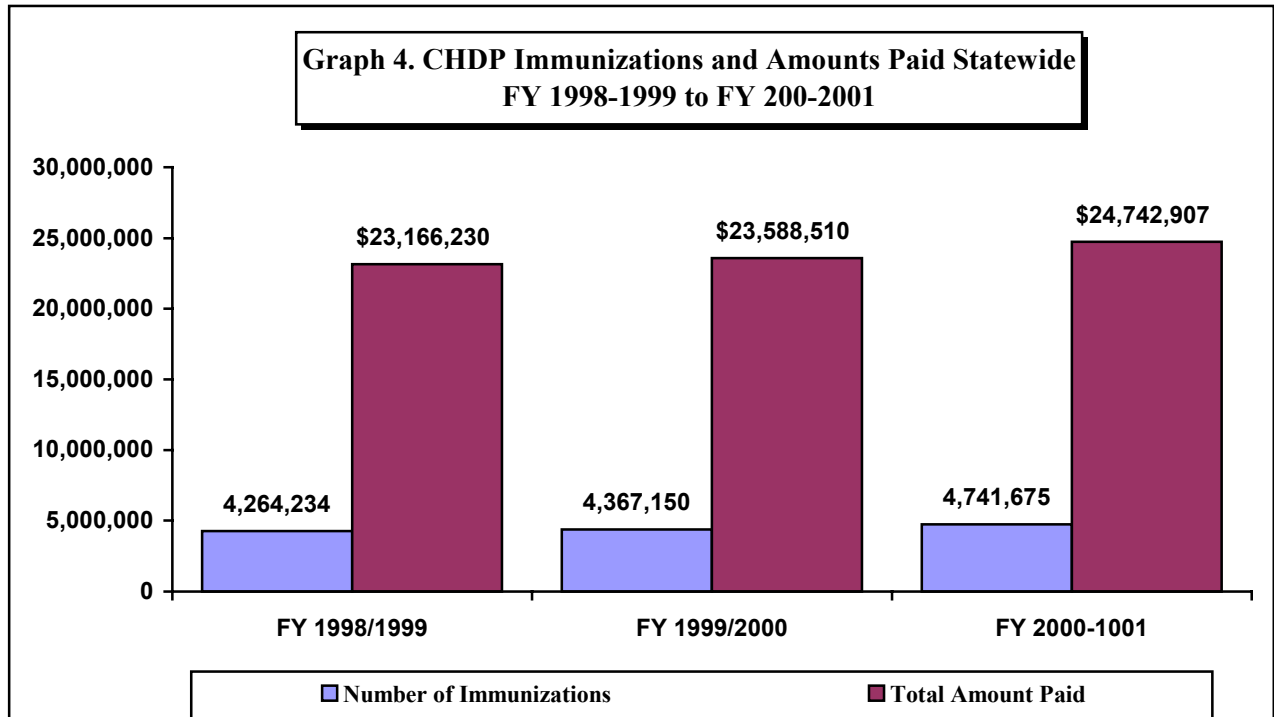
During FY 2000-01, the CHDP program provided services to 1,077,985 (49.2 percent) females and 1,103,546 (50.3 percent) males. For 11,626 (0.5 percent) of the children, the gender was not indicated. (see Table 73, page 88).

### **Immunizations**

The CHDP program provided 4,741,675 individual immunizations in FY 2000-01, 374,525 more compared to FY 1999-00. This represents an 8.6 percent increase over FY 1999-00 when 4,367,150 immunizations were provided by CHDP (see Graph 4). Beginning September 1, 1999, Hepatitis A was added to the immunization. There were 801,992 Hepatitis A shots represented as part of the total individual immunizations in FY 2000-01.

The amount paid for CHDP immunizations during FY 2000-01 totaled \$24,742,907, an increase of \$1,154,397 (4.9 percent) from \$23,588,510 in FY 1999-00. The average cost per immunization was \$7.75 in FY 2000-01, which is no significant change from \$7.79 in FY1999-00. The cost of an immunization is composed of two parts: the administration fee, and the cost of the vaccine. In the CHDP program, the

majority of vaccines are supplied by the Federal Vaccine-for-Children (VFC) program. Therefore, the average cost of vaccines includes primarily the administration fee and the costs for the few vaccines that providers must purchase directly.



### **Type of Providers**

During FY 2000-01, 21 provider types (and one category unknown) provided CHDP services to children. Among the various provider types, 18.7 percent of the services were provided by Physician Solo Practices, 19.3 percent by Physician Groups, and 11.0 percent by Rural Health Clinics, 3.6 percent by County Health Department Clinic, 3.4 percent by Clinic Labs/Lead, 3.3 percent by Community Clinics. All other provider types provided the remaining 40.7 percent of the services. (See Table 46 - Statewide Summary of CHDP Provider Types and Amount Paid, page 57).

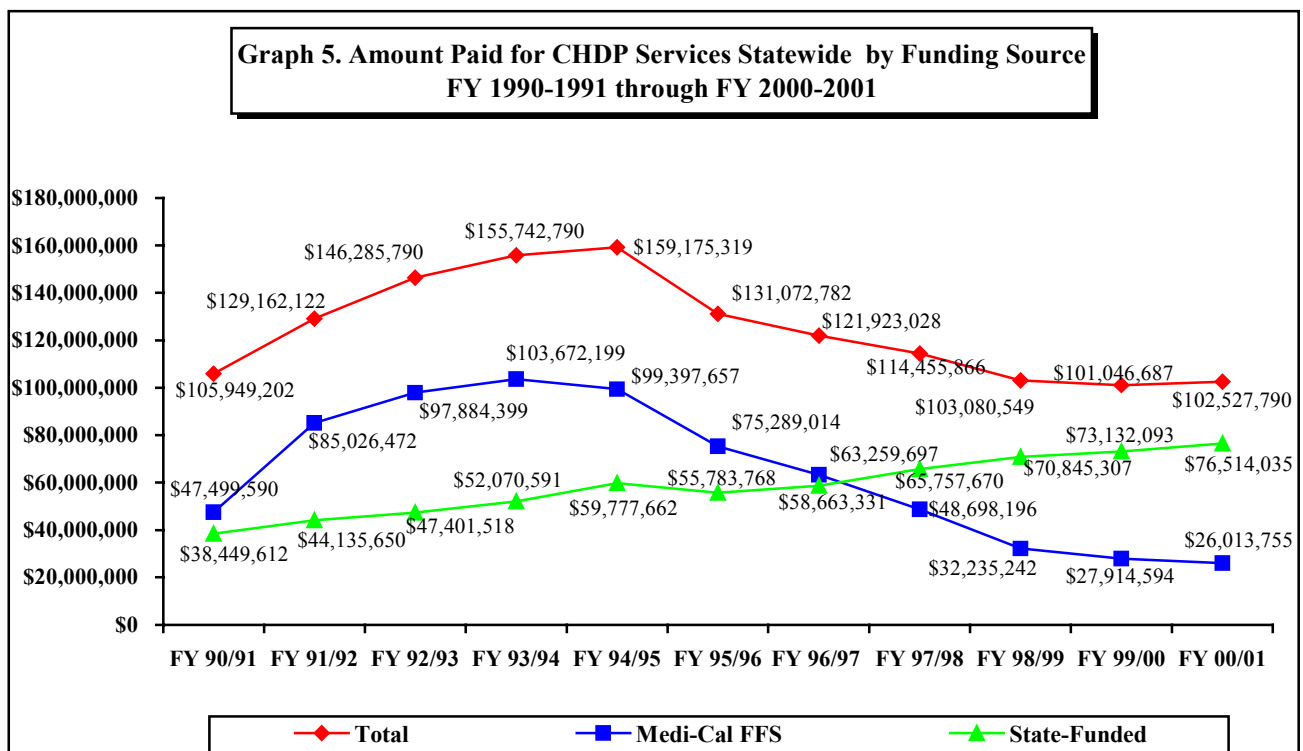
### **Expenditures**

During FY 2000-01, a total of \$102,527,790 was paid for both Medi-Cal Fee-For-Service (FFS) and State-funded CHDP preventive health examinations (See Graph 5). This is an increase of \$1,481,103 (1.5 percent) from the \$101,046,687 paid in fiscal year 1999-00.

Of the \$102,527,790 paid for CHDP services, \$26,013,755 was paid for services to 398,789 Medi-Cal FFS funded children at an average cost of \$65.23 per child and 536,307 Medi-Cal funded visits at an average cost of \$48.51 per visit. The number of children for whom services were paid by Medi-Cal FFS represents a 6.6 percent

decrease from the 426,968 Medi-Cal FFS children served in fiscal year 1999-00 (See Graph 6). This shift can be partially attributed to the transition of children to MCMC (Medi-Cal Managed Care) Health Plans.

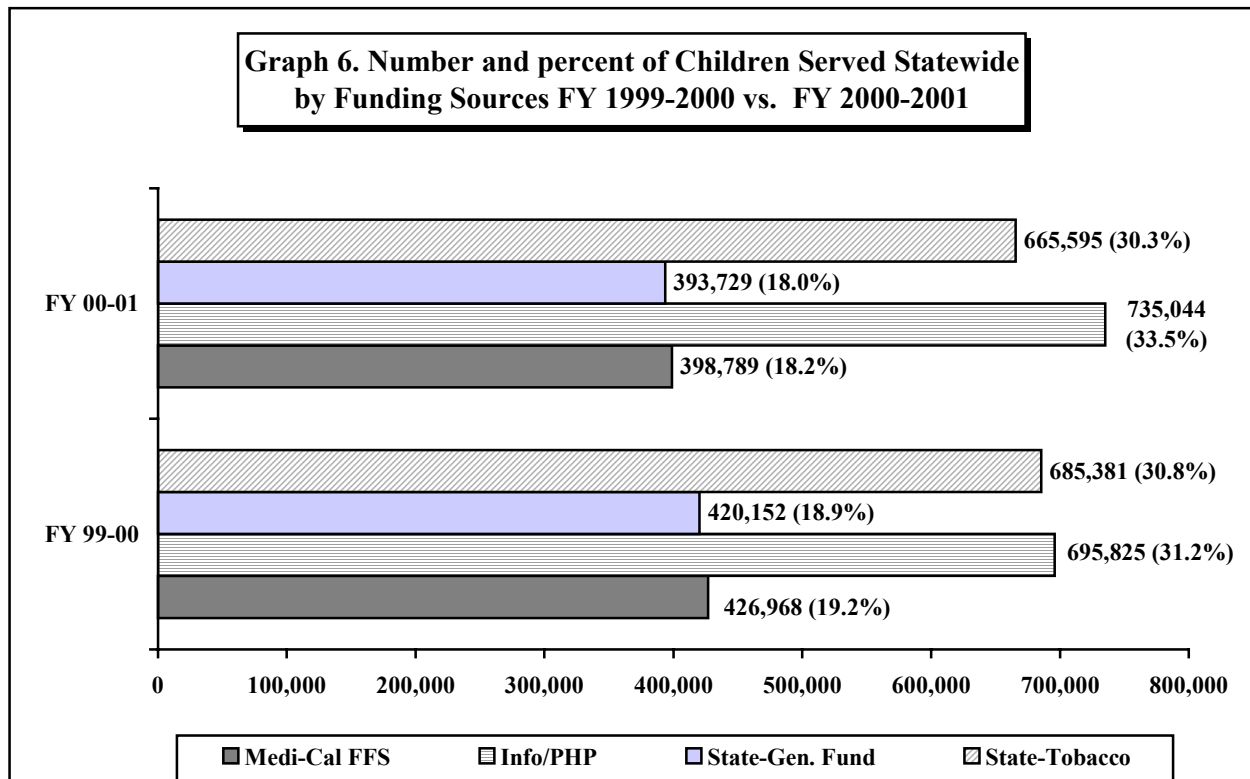
Over the years, the Medi-Cal program has been undergoing a gradual transition from Medi-Cal FFS to MCMC in the most populated counties. MCMC providers are required to submit an “Information-Only” PM 160 when children receive a CHDP examination. In FY 2000-01, 735,044 Info/PHP children were served by CHDP program a 5.6 percent increase over FY 1999-00. Because the PM 160 “Information-Only” form is used as a reporting form rather than a billing form, expenditure data is unavailable for this group of children. Therefore, those children cannot be included in calculating the average cost per child for CHDP services.



Although the number of CHDP services delivered by MCMC Plans has continued to increase, an unknown percentage of those services may remain unreported through the “Information-Only” PM 160 form. There may be significant under-reporting by MCMC plans because the “Information-Only” PM 160 is not used for reimbursement.

For State-funded CHDP services, compared to FY 1999-00 when providers were paid \$73,132,093 for CHDP preventive health exams and services, providers were paid \$76,514,035 for CHDP preventive health exams and services provided to 1,059,324 State-funded children with 1,537,074 visits, an increase of \$3,381,942 (4.6 percent) in FY 2000-01. The average cost per child was \$72.23 and \$49.78 per visits (see Graph 5).

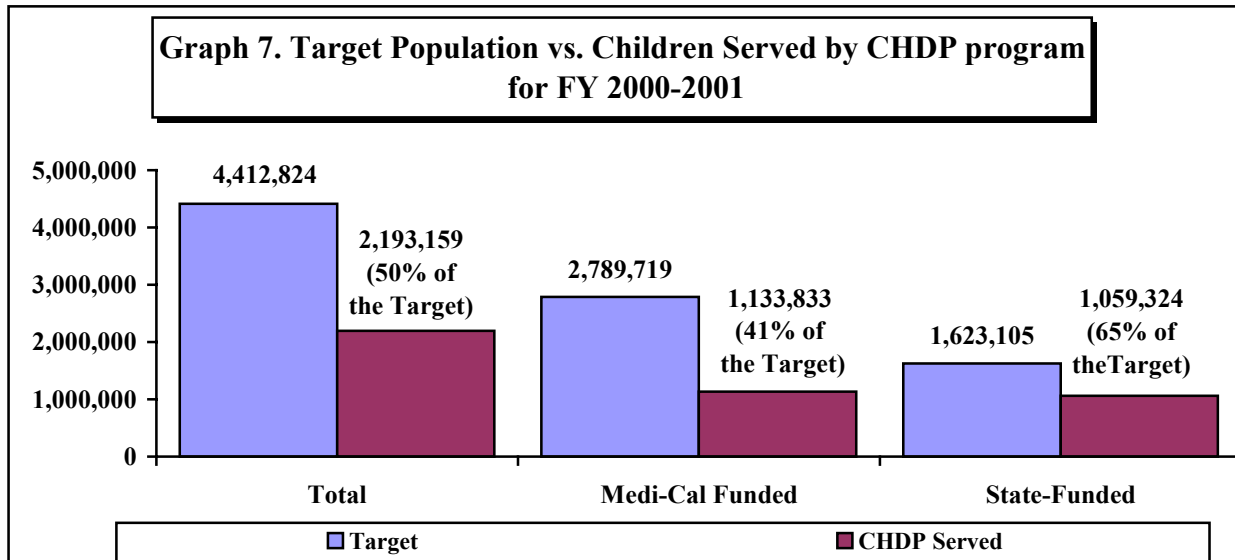
State-funded CHDP services receive funds from two sources: the State General Fund and the Proposition 99 Tobacco Tax. A total of 393,729 children received services paid from the State General Fund and 665,595 children received services paid from the State Tobacco Tax Funds. The percentage of children receiving CHDP services paid for by State Tobacco Funds shows no significant changes in FY 2000-01 (30.3%), when compared to FY 1999-00 (30.8%) (see Graph 6).



### **Target Population**

The CHDP target population is comprised of (1) children eligible for Medi-Cal FFS less than 21 years of age, and (2) non Medi-Cal eligible children under 19 years of age from families with incomes under 200 percent of the FPL. Children that meet these criteria qualify for health assessments through the CHDP program.

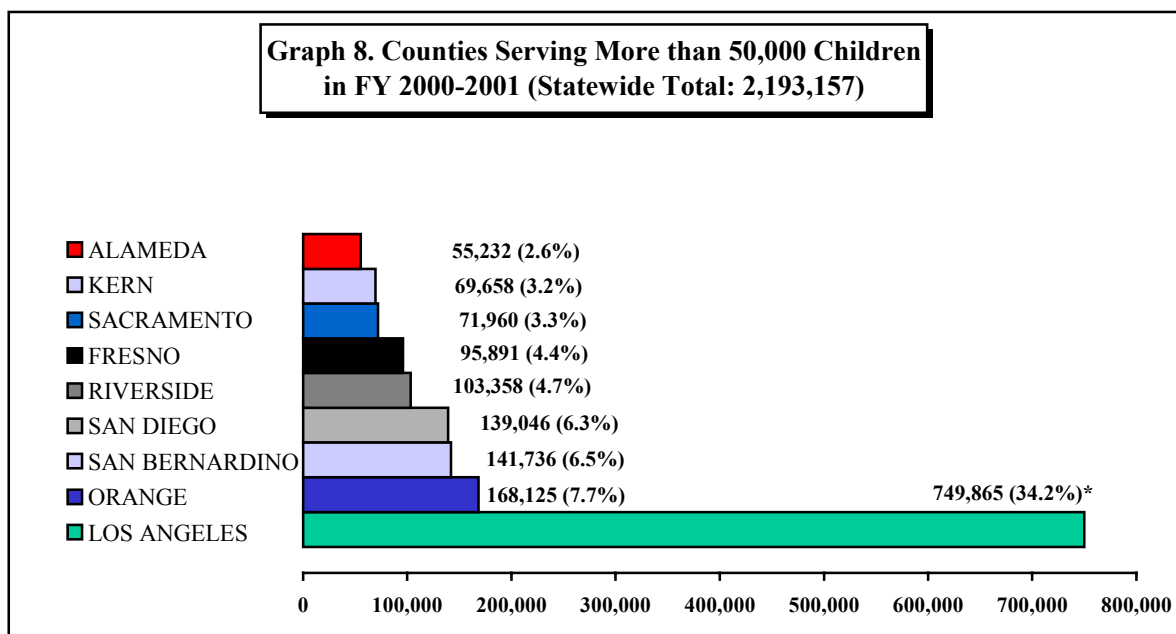
The CHDP estimated target population for FY 2000-01 was 4,412,824. The total number of children served (2,193,157) accounted for 50 percent of the target population. The Medi-Cal funded estimated target population was 2,789,719, of which 1,133,833 (41%) were served by CHDP program. The State-funded estimated target population was 1,623,105, of which 1,059,324 (65%) were actually served by the CHDP program (see Graph 7).



For a complete listing of the target population in each county, including the Medi-Cal and State-funded target population, and the number of children served in FY 2000-01, see Table 71 – CHDP Children Served vs. Target population by Source and County/City (page 86).

### **Counties Serving Over 50,000 Children**

During FY 1999-00, there were nine counties that served over 50,000 CHDP children. Those counties were Los Angeles, Orange, San Bernardino, San Diego, Riverside, Fresno, Sacramento, Kern, and Alameda. These counties served approximately 73 percent of the children statewide. Los Angeles served the most children at 749,865, which represents 34 percent of the children statewide. (Note: the Los Angeles County numbers exclude the cities of Long Beach and Pasadena, which





report separately) (see Graph 8).

\* Percentage of total number children served.

### **Unduplication Method**

Because more than one PM 160 form may be submitted for an individual child, and a child may have more than one exam, to unduplicate these claims, a process was used to determine the total number of children served.

The following methodology was used to calculate an unduplicated count of children served in fiscal year 2000-01.

- Medi-Cal Fee-For-Service claims are unduplicated by Medi-Cal Identification Number. This may result in an over count of children because some children have more than one Medi-Cal identification number during a given year.
- State-funded and Info/PHP claims are unduplicated using the child's name and birth date. This may result in an undercount for children with the same name and birth date.

Due to the limitations of identifying fiscal year information, the unduplication method results in an estimate of children served.